

2/1/2021

Division of Corporations

F2100000432313

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H21000043231 3)))



H210000432313ABCQ

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

FILED
2021 FEB -1 PM 4:43
SECRETARY OF STATE
TALLAHASSEE, FL

To: Division of Corporations
Fax Number : (850)617-6383

From: Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (614)280-3338
Fax Number : (954)208-0845

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: _____

FOREIGN PROFIT/NONPROFIT CORPORATION
Equity Services, Inc.

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$70.00

RECEIVED
Feb 1 2021 JAN 31 PM 2:28

2/2/21

DocuSign Envelope ID: BC5994B5-AA15-44C8-8FCA-078FE89B5EA8

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

Equity Services, Inc.

1.

(Enter name of corporation, must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp.," "Ltd.," "Co., Ltd." or "Corp. Ltd.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

Vermont

03-0221141

3.

(FBI number, if applicable)

(State or country under the law of which it is incorporated)

10/07/1968

Perpetual

4.

(Date of incorporation)

5.

(Date of duration, if other than perpetual)

Upon Filing

6.

(Date first transacted business in Florida, if prior to registration)

(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

One National Life Drive, Montpelier, VT 05604

7.

(Principal office address)

(Current mailing address, if different)

8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name:

CT Corporation System

Office Address:

1200 South Pine Island Road

Plantation,

33324

 Florida

(City)

(Zip code)

9. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

CT Corporation System

By: Tracy Kellner - Senior Manager

(Registered agent's signature)

10. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

DocuSign Envelope ID: BC5994B5-AA15-44C8-8FCA-078FE89B5EA8

11. Names and business addresses of officers and/or directors:

A. DIRECTORS

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: Mehran Assadi

Address: One National Life Drive
Montpelier, VT 05604

Director: _____

Address: _____

B. OFFICERS

President: Ataollah Azarshahi

Address: One National Life Drive
Montpelier, VT 05604

Vice President: _____

Address: _____

Secretary: Ian McKenny

Address: One National Life Drive, Montpelier, VT 05604

Treasurer: Eric Kucinskas

Address: One National Life Drive, Montpelier, VT 05604

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

12. Catherine Fisk
Signature of Director or Officer

The officer or director signing this document (and who is listed in number 11 above) affirms that the facts stated herein are true and that he or she is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

13. Catherine Fisk - Asst. Secretary
(Typed or printed name and capacity of person signing application)

FILED
2021 FEB - 1 PM 4:43
SECRETARY OF STATE
TALLAHASSEE, FL

DocuSign Envelope ID: BC5994B5-AA15-44C8-8FCA-078FE89B5EA8

Officer & Director Information Addendum		
Name	Title	Address
Catherine Fisk	Asst. Secretary	One National Life Drive, Montpelier, VT 05604

FILED
2021 FEB - 1 PM 4:43
SECRETARY OF STATE
TALLAHASSEE, FL.

STATE OF VERMONT
OFFICE OF SECRETARY OF STATE

Certificate of Good Standing

I, James C. Condos, Vermont Secretary of State, do hereby certify that according to the records of this office

EQUITY SERVICES, INC.

a Domestic Profit Corporation formed under the laws of the State of VERMONT, was filed for record in this office on Oct 07, 1968.

I further certify that the company has perpetual duration; that its most recent annual report is file, and that as of this date, articles of dissolution / withdrawal have not been filed.

January 29, 2021

Given under my hand and seal of office, at Montpelier, the State Capital.



James C. Condos

James C. Condos
Vermont Secretary of State

Business ID: 0062598
Certificate Number: 2013796220001

FILED
2021 FEB - 1 PM 4:16
SECRETARY OF STATE
TALLAN, SSEE, H